Campaign Finance Report

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identificati Number :	on 2008	3205				port ed B		CANDI	DATE		СОМ	1ITTEE	ITTEE / LOBBYIST					
Name of Filing C	ommittee, Candid	ate or L	obbyist:		FAR	RRY,	FRAN	K FRIEN	DS OF									
Street Address:	PO BOX 231																	
City:	LANGHORNE							State:	PA			Zip Cod	le: 19	047-0	221			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	PRE	-	2.	30 DA PRIMA		POST-	3. X		AMENDM REPORT?		Yes	No			
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE	-	5.	30 DA ELECT		POST-	6.		TERMINA REPORT?		Yes	No	•	/	
report type)	ANNUAL REPORT	7.	Year 2019					IG METH				PAPER		/	DISKE	TTE		
Name of Office S	ought by Candida	te:	-					DATE C	F ELE	СТІО	N	District Number	Office Code	Par	ty Code	Coun		
								МО	DAY	YE	AR		10000	REF)	09		
								11		5	2019		(SEE IN	STRUCTI	ONS FOR (CODES)		
Summary of Expenditures	Receipts and	МО	DAY	YEAR	ł			МО	DAY	YE	AR	FO	R OFFI	CE USE	ONLY			
Expenditures	irom:		5 7	2	019	T	<u> </u>	6		10	2019							
A. Amount Bro	ught Forward Froi	n Last R	eport				\$			111,8	85.19							
B. Total Monet	ary Contributions	And Rec	eipts (From	Sche	dule	e I)	\$				0.00							
C. Total Funds	Available (Sum O	f Lines A	and B)				\$			111,8	85.19							
D. Total Expend	ditures (From Sch	edule II	I)				\$			3,4	67.07							
E. Ending Cash	Balance (Subtrac	t Line D	From Line C)			\$:	108,4	18.12							
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sc	hedu	le I	I)	\$			3	50.00							
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)	1			\$				0.00							
				AFF	ΊD	AVI	T SE	CTION										
PART I - If this is	a Committee rep	ort, trea	surer sign h	ere. I	If th	his is	a Can	ididate r	eport, d	andio	late sig	ın here.						
I swear (or affirm) correct and comple	that this report, inc ete.	luding the	attached sch	edules	s file	ed on	paper (or by elect	ronic m	edium,	, are to t	he best o	f my knov	wledge	and beli	ef , tru	ıe.	
Sworn to and subs	cribed before me this day of	5	20							s	ignature	of Perso	n Submit	ting Rep	oort			
	Signatu	re					-					Prin	ted Name	•			_	
My Commission Ex	rpires						_					Emai	i					
	МО	D	AY	YR					Ar	ea Cod	е	Daytim	e Teleph	one Nu	mber			
Part II- If this is	a report of a can	didate's	authorized (Comn	nitte	ee, C	andida	ate shall	sign h	ere.								
I swear (or affirm) No 320) as amende	that to the best of red.	ny knowl	edge and belie	f this	poli	itical	commi	ittee has r	ot viola	ted an	y provis	ions of the	e act of J	une 3,1	937 (P.L	. 1333	3,	
Sworn to and subsc	ribed before me this day of		20								s	ignature o	of Candida	ate			-	
							-					Printe	d Name				-	
My Commission Exp	Signature						-					Ema	il				-	
my commission exp																		
	МО	D	AY	ΥR					Area	Code		Da	ytime T	elephor	ne Numb	er		

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -								
Name of Filing Committee or Candidate	Reporting Period							
FARRY, FRANK FRIENDS OF	From:	<u>5/7/201</u>	<u>9</u> То:	6/10/2019				
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor								
TOTAL for the Reporting	g Period	(1)	\$	0.00				
2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)								
Contributions Received From Political Committees (Part A)			\$	0.00				
All Other Contributions (Part B)	\$	0.00						
TOTAL for the Reporting	y Period	(2)	\$	0.00				
3. Contributions Received Over \$250.00 (From Part C and Part D)								
Contributions Received From Political Committees (Part C)			\$	0.00				
All Other Contributions (Part D)			\$	0.00				
TOTAL for the Reporting	J Period	(3)	\$	0.00				
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)								
TOTAL for the Reporting	g Period	(4)	\$	0.00				
Total Monetary Contributions and Receipts During this Reporting Period (Add an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	0.00				

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	this Part to itemize only with an aggregate valu							
Name of Filing Comm	nittee or Candidate		Re	porting	Period			
			From: To:				:	
		l			DATE			AMOUNT
Full Name of Contributi	ing Committee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
	•	•			•		\vdash	DACE TOTAL

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

PAGE TOTAL\$ 0.00

ALL OTHER CONTRIBUTIONS

\$50.01 TO \$250.00

Use this Part to itemize all other contributions with an aggregate value from \$50.01 to \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part A)

Name of Fining Committee of Candidate			Reporting Period From: To:					
			l		DATE			AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)						

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

PAGE TOTAL \$0.00

PART C

Contributions Received From Political Committees

OVER \$250.00

Use this Part to itemize only contributions received from Political committees with an aggregate value from Over \$250.00 in the reporting period.

Name of Filing Committee or Candid	ate		Reporting	Period				
			From:			То:		
				DA	TE		Α	MOUNT
Full Name of Contributing Committee	ee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on S	chedule I, Detail	ed Summary Pa	age, Sectio	n 3.			\$	0.00

ALL OTHER CONTRIBUTIONS

OVER \$250.00

Use this Part to itemize all other contributions with an aggregate value of over \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part C.)

Name of Filing Committee or Candidate			Rep	orting Pe	riod			
			Fror	n:		To) :	
				D	ATE		А	MOUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plu	s 4)					
Employer Name		•		Occupa	tion		•	
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Coo	de (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed S	ummary Page	Section .	on 3.			\$	PAGE TOTAL 0.00

OTHER RECEIPTS

REFUNDS, INTEREST INCOME, RETURNED CHECKS, ETC.
Use this Part to report refunds received, interest earned, returned checks and prior expenditures that were returned to the filer.

Name of Filing Committee or Car	ndidate		Report	ing Perio	od			
			From:			To:		
				D	ATE		A	MOUNT
Full Name				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	·	·						
Enter Grand Total of Part E on	Schedule T. Detailed	d Summary Page	Section	4			P	AGE TOTAL
	2, 200 0000		22300				\$	0.00

SCHEDULE II

IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED

USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS
DURING THE REPORTING PERIOD.
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Perio	d	
FARRY, FRANK FRIENDS OF	From:	<u>5/7/2019</u> To:	6/10/2019
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTOR		
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)		
TOTAL for the Reporting Pe	eriod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	eriod (3)	\$	350.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page,	•	\$	350.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candid	ate		Reporting	g Period			
			From:			To:	
				DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:							
Enter Grand Total of Part F on S	chedule II In-Kir	nd Contributions Deta	iled Sum	mary Pag	ле Г		PAGE TOTAL
Section 2.	incudic 11, 111 Kii	ia contributions beta	nea Sam	illial y I as	,		PAGE TOTAL
						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED VALUE OVER \$250.00

Name of Filing Committee or Candidate	e or Candidate Reporting Period				
FARRY, FRANK FRIENDS OF	From:	5/7/2019	То:	<u>6/10/2019</u>	

							DATE			AMOUNT	
Full Name of Contributor Four Lanes End, LLC					МО		DAY	YEAR			
Mailing Address 106 Maple Ave City Langherne State Zip Code(Plus 4								\$	350.00		
City Langhorne	State		Zip Code	(Plus 4)		5	1	2019			
	PA		19047								
Employer of Contributor n/a	•		•		Occupation n/a						
Employer Mailing Address/Prince Business	ipal Place of	City		State		Zip Code(Plus De			Description of Contribution		
106 Maple Ave		Langh	orne	PA	19047 rent						
Enter Grand Total of Part G	on Schedule II	in-Kind	Contribu	tions Deta	iled					PAGE TOTAL	
Summary Page, Section 3.	nter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed ummary Page, Section 3.							350.00			

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or C	Candidate		Reporti	ng Period			
FARRY, FRANK FRIENDS OF			From	<u>5/</u>	7/2019	То:	6/10/2019
				DATE			AMOUNT
To Whom Paid Sports Recruiters/SR Gear			МО	DAY	YEAR		
Mailing Address 4320 Crest	tview Road		5	13	2019	\$	200.00
City Harrisburg State Zip Code (Plus 4) PA 17112-6128			Descrip adverti				
To Whom Paid Feasterville Business Assn				DAY	YEAR		
Mailing Address 67 Buck Ro	oad		5	13	2019	\$	100.00
City Southampton	State PA	Zip Code (Plus 4) 18966	Descrip adverti	otion of Exp	penditure		
To Whom Paid TMA Bucks Foundation	·		мо	DAY	YEAR		
Mailing Address 7 Neshami	ny Interplex, Suite 103		5	13	2019	\$	150.00
City Trevose	State PA	Zip Code (Plus 4) 19053	Descrip sponso	otion of Exp	penditure		
To Whom Paid Neshaminy Retirees			МО	DAY	YEAR		
Mailing Address 2001 Old Lincoln Highway			5	13	2019	\$	250.00
City Langhorne State Zip Code (Plus				tion of Ex	enditure	·	

City Lang	phorne	State PA	Zip Code (Plus 4) 19047	Description of Expenditure luncheon				
To Whom Paid Lower Southampton Fourth of July Parade					DAY	YEAR		
Mailing Address 1500 Desire Ave		5	13	2019	\$	200.00		
City Feas	iterville	State PA	Zip Code (Plus 4) 19053	Description of Expenditure advertising				

To Whom Paid Southampton Baseball	мо	DAY	YEAR				
Mailing Address PO Box 938	5	13	2019	\$		300.00	
City Southampton State Zip Code (Plus 4) PA 18966	Descrip adverti	otion of Exp	penditure				
To Whom Paid Maverick Finance	МО	DAY	YEAR				
Mailing Address 1426 N. 3rd Street	5	13	2019	\$		100.00	
City Harrisburg State Zip Code (Plus 4) PA 17102	Descrip	Description of Expenditure design fee					
To Whom Paid American Express	МО	DAY	YEAR				
Mailing Address 200 Vesey Street	5	22	2019	\$		16.99	
City New York State Zip Code (Plus 4) NY 10285	Descrip	Description of Expenditure fees					
To Whom Paid HRCC	МО	DAY	YEAR				
		DAY 30	YEAR 2019	\$		400.00	
HRCC	MO 5		2019			400.00	
HRCC Mailing Address PO Box 11787 City HARRISBURG State Zip Code (Plus 4)	MO 5	30 otion of Exp	2019			400.00	
HRCC Mailing Address PO Box 11787 City HARRISBURG State Zip Code (Plus 4) PA 17108 To Whom Paid	MO 5 Descripticket t	30 option of Exp o event	2019 penditure			400.00	
Mailing Address PO Box 11787 City HARRISBURG State Zip Code (Plus 4) PA 17108 To Whom Paid McGrath's Pub	MO 5 Descripticket to MO 6	30 otion of Exp o event DAY	2019 Penditure YEAR 2019	\$			
HRCC Mailing Address PO Box 11787 City HARRISBURG State PA 2ip Code (Plus 4) 17108 To Whom Paid McGrath's Pub Mailing Address 202 Locust Street City HARRISBURG State Zip Code (Plus 4)	MO 5 Descripticket t MO 6 Descrip	30 option of Exposered by the second by the	2019 Penditure YEAR 2019	\$			
Mailing Address PO Box 11787 City HARRISBURG State PA 17108 To Whom Paid McGrath's Pub Mailing Address 202 Locust Street City HARRISBURG State PA 17101 To Whom Paid	MO 5 Descripticket to MO 6 Descriptioning	30 ption of Exp o event DAY 2 ption of Exp	2019 YEAR 2019 penditure	\$			

						Р			
To Whom Paid Fireside Inn	МО	DAY	YEAR						
Mailing Address 237 Elmwo	6	2	2019	\$	20.00				
City Feasterville State Zip Code (Plus 4) PA 19053				Description of Expenditure dining					
To Whom Paid Aroogas Draft House	МО	DAY	YEAR						
Mailing Address 201 N. 2nd Street				2	2019	\$	23.00		
City Harrisburg State Zip Code (Plus 4) PA 17101				Description of Expenditure dining					
To Whom Paid Midtown Tavern	мо	DAY	YEAR						
Mailing Address 1101 N. 2	6	2	2019	\$	36.00				
City Harrisburg	State PA	Zip Code (Plus 4) 17102	Description of Expenditure dining						
To Whom Paid Middletown Township			МО	DAY	YEAR				
	ıl Way		MO 6	DAY 2	YEAR 2019	\$	100.00		
Middletown Township	ol Way State PA	Zip Code (Plus 4) 19047	6	2 otion of Exp	2019		100.00		
Mailing Address 3 Municipa	State PA		6 Descrip	2 otion of Exp	2019		100.00		
Mailing Address 3 Municipa City Langhorne To Whom Paid	State PA sters		6 Description advertion	2 Otion of Exp sing	2019 penditure		200.00		
Mailing Address 3 Municipa City Langhorne To Whom Paid William Tennent Football Boos	State PA sters		6 Description advertion MO 6	DAY 4	2019 Penditure YEAR 2019	\$			
Mailing Address 3 Municipal City Langhorne To Whom Paid William Tennent Football Boos Mailing Address PO Box 19	State PA sters 2 State	19047 Zip Code (Plus 4)	6 Description of the control of the	DAY 4	2019 Penditure YEAR 2019	\$			
Mailing Address 3 Municipal City Langhorne To Whom Paid William Tennent Football Boos Mailing Address PO Box 19 City Warminster	State PA Sters 2 State PA	19047 Zip Code (Plus 4)	6 Descrip adverti MO 6 Descrip adverti	DAY 4 btion of Exp sing	2019 Penditure YEAR 2019 Penditure	\$			

To Whom Paid Kristin Benhayon			МО	DAY	YEAR		
Mailing Address 6 Firebush Road			6	4	2019	\$ 199.64	
City	City Levittown State Zip Code (Plus 4) Description of Expenditure reimbursement for expense						
						PAGE TOTAL	
Enter	Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						\$ 3,467.07